

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/018042
FILING DATE

APPLICANT(S)

12/16/04

CLAIMS

AS FILED	AFTER		AFTER		IND.	DEP.	
	1st AMENDMENT	IND.	DEP.	2nd AMENDMENT			
1	/	/	/	/			
2	/	/	/	/			
3	/	/	/	/			
4	/	/	/	/			
5	5	/	/	/			
6	5	/	/	/			
7	5	/	/	/			
8	①	/	/	/			
9	⑧	/	/	/			
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50							
TOTAL IND.		2		2			
TOTAL DEP.		14		14			
TOTAL CLAIMS		16		16			

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3831